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U.S. Department of Commerce
Patent and Trademark Office

**COMBINED DECLARATION (37 CFR
1.63) AND POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION**

Declaration OR Declaration
Submitted Submitted after
with Initial Filing Initial Filing

Attorney Docket Number	24174-08750
First Named Inventor	Deepika Srinivasan
<i>COMPLETE IF KNOWN</i>	
Application Number	10/789,947
Filing Date	February 27, 2004
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Phase Correlation Based Motion Estimation in Hybrid Video Compression

the specification of which

is attached hereto

OR

was filed on 2/27/2004 as United States Application Number or PCT International

Application Number [10/789,947] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations. § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority	Certified Copy Attached?	
			Not Claimed	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental sheet attached hereto.

DECLARATION

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I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Robert R. Sachs Albert C. Smith	42,120 20,355		

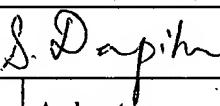
Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Deepika	Middle Initial		Family Name	Srinivasan			Suffix	
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Additional inventors are being named on supplemental sheet(s) attached hereto



DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
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Inventor's Signature	<i>AKrupiezka</i>					Date	4/5/04		
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City	Middletown		State	CT	Zip	06457	Country	USA	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
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Inventor's Signature	<i>S. Pejhan</i>					Date	4/5/04		
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Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Mailing Address									
Mailing Address									
City			State		Zip		Country		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Mailing Address									
Mailing Address									
City			State		Zip		Country		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									